

BEST AVAILABLE COPY

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PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2000

Application or Docket Number

09/936605

CLAIMS AS FILED - PART I

		(Column 1)	(Column 2)
TOTAL CLAIMS			
FOR	NUMBER FILED	NUMBER EXTRA	
TOTAL CHARGEABLE CLAIMS	16 minus 20 =		
INDEPENDENT CLAIMS	1 minus 3 =		
MULTIPLE DEPENDENT CLAIM PRESENT			<input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

		(Column 1)	(Column 2)	(Column 3)
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	20	Minus	20	<input checked="" type="checkbox"/>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

SMALL ENTITY TYPE	OTHER THAN OR SMALL ENTITY	
	RATE	FEES
BASIC FEE	500	<input checked="" type="checkbox"/>
XS 9=		<input type="checkbox"/>
X40=		<input type="checkbox"/>
+135=		<input type="checkbox"/>
TOTAL	500	<input checked="" type="checkbox"/>

SMALL ENTITY	OTHER THAN OR SMALL ENTITY	
	RATE	ADDITIONAL FEE
X\$ 9=		<input type="checkbox"/>
X40=		<input type="checkbox"/>
+135=		<input type="checkbox"/>
TOTAL ADDIT. FEE		<input checked="" type="checkbox"/>

AMENDMENT B	RATE ADDITIONAL FEE		RATE ADDITIONAL FEE	
	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
Total	X\$ 9=	<input type="checkbox"/>	X\$18=	<input type="checkbox"/>
Independent	X40=	<input type="checkbox"/>	X80=	<input type="checkbox"/>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	+135=	<input type="checkbox"/>	+270=	<input type="checkbox"/>
	TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

AMENDMENT C	RATE ADDITIONAL FEE		RATE ADDITIONAL FEE	
	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
Total	X\$ 9=	<input type="checkbox"/>	X\$18=	<input type="checkbox"/>
Independent	X40=	<input type="checkbox"/>	X80=	<input type="checkbox"/>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	+135=	<input type="checkbox"/>	+270=	<input type="checkbox"/>
	TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.